



SOUTH DAKOTA BOARD OF NURSING
DEPARTMENT OF HEALTH
4305 S. Louise Avenue Suite 201
Sioux Falls, SD 57106-3115
Phone 605-362-2760

Application for a Temporary Permit for an Individual Seeking **Registered Nurse** Licensure by NCLEX[®]

A Temporary Permit will be issued when the following have been received at the Board of Nursing office:

1. Online application for licensure by examination
2. Completed Criminal Background Check cards and fee
3. Nursing Education Information from your school of nursing
4. Completed application for a Temporary Permit and \$25 fee
5. NCLEX Registration

Applicant First/Last Name: _____

SSN: _____

Address (City,State,Zip): _____

Email Address: _____

School of Nursing: _____

Graduation Date: _____

Name of Employer: _____

Address of Employer: _____

I understand that:

- South Dakota law regulating the practice of nursing is mandatory; it is unlawful to practice as a registered nurse without holding a valid Temporary Permit or current license to practice as a registered nurse.
- “Under the supervision of a licensed practical nurse” means that the holder of such temporary permit shall practice only under the supervision of a registered nurse **on duty** in the area where the holder of the permit is practicing.
- Temporary permits become invalid upon the earlier of, notification of the results of the first examination or ninety days following the date of issuance. **Temporary permits are not renewable.**
- If there is a change in employers, the Board of Nursing is to be informed. A new permit is required and a fee of \$25 for each additional permit.
- I further understand that in cases of violation of the law, penalties may be imposed. I also understand that I am to use the initials R.N. App (Registered Nurse Applicant).

Signature of Applicant: _____

Date: _____